(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 26 2018

NEW HAMPSHIRE

P	LEASE PRINT		NEW HAMPSHIRE DEPARTMENT OF STAT
I. Name of Lobbyist(s)	Richard B	ouley / Tyler	Clark
II Name of Johnvist's	partnership, firm or corporation	, if any:	
Den	nehy & Boule	y LLC	
17 De	pot St. #3	Concord (State)	VH 0330/ (Zip Code)
Business Address: (Stre	• •	ty) (State)	(5.1)
(Telephone)	1601_()	(Fax) e-mail	
III. This statement cov reportable expense tra	vers: (Choose one – file separate insactions which are not attribut	reports for each client, OR you able to any one client).	may file a separate report for
All reportable trans	actions occurring in the months pri	or to the reporting date relative to	the following client:
America		nevapists As	soc. NH Chapte
<u>OR</u>			
All reportable transaunrelated to any particu	nctions by the lobbyist (including that elient.	he lobbyist's family), or the lobby	ying firm listed below which are
IV. Date of Report	April 25, 2018 🛘	July 25, 2018	
Reports cover: activity	ty from date of registration to 3/31/18		N8 .
	October 31, 2018	January 30, 2019	
4	activity from 7/1/18 to 9/30/18	activity from 10/1/18 to 12	2/31/18
V. There have been If this box is checked, a Concord, NH 03301.	no fees received and no repor complete just this form and submit	table transactions made sind it to the Secretary of State's Office	ee the last report. Dee, State House, Room 204,
VI. Check if additions	al reports are attached:		
If you have receive	ed fees or made expenditures, you	must file Addendum A- Fees an	d Expenses
☐ If you have paid as	n honorarium or reimbursed expen	scs, you must file Addendum B-	Report of Honorariums or
Expense Reimburseme	ent or your family has made political c	ontributions, you must file Adde	ndum C- Political Contributions
ii you, your iirii, t	or your raining has made permour e		
I have read RSA 15, R	irmation by Lobbyist SA 15-B, RSA 14-C and RSA 664 st of my knowledge and belief. Bauley Output Description:	and hereby swear or affirm that	the foregoing information is true
1 1 1	(/) .		

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

21718	•
1. Name of Lobbyist(s) Richard Bailey Tyl	er Clark
II. Name of Jobbyist's partnership, firm or corporation, if any:	
Dennehy & Bouley LLC (Name of partnership), firm or corporation)	<u> </u>
III. Name of Client American Physical Therapis Assoc. NH Chapter	it Date 07/24/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 5,000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar ye	b) \$5,000.00
c) Total of all fees received to date (Add lines a and b)	c)\$ 10,000.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 4,000.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repeters. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by nay be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the persor d with a value of \$25.00 or less); and rting period of greater than \$25.00 fo e of greater than \$25, purchase of a r than \$25, but not greater than \$50 expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ብ \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Richard L. Bowley (Signature of lobbyist)	07/24/18 (Date)
Richard Bouley (Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): American Physical Therapist Date of Report (check one): July 25, 2018 🗽 October 31, 2018 🗆 January 30, 2019 🗆 April 25, 2018 🗆 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.